FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
08/181,367	01/14/94	1807	\$710.00	028723016	12	17	1

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Receipt is acknowledged of this patent application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

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CONTINUING DATA AS CLAIMED BY APPLICANT-

THIS APPLN IS A CON OF 08/054,353 04/28/93 ABN WHICH IS A CON OF 07/537,305 06/12/90 WHICH IS A CIP OF 07/497,098 03/20/90 ABN WHICH IS A CIP OF 07/444,669 12/01/89 ABN WHICH IS A CIP OF 06/937,793 12/04/86 ABN WHICH IS A CON OF 06/819,314 01/16/86 ABN WHICH IS A CON OF 07/382,094 07/19/89 ABN

TITLE

CHROMOSOME-SPECIFIC STAINING TO DETECT GENETIC REARRANGEMENTS

PRELIMINARY CLASS: 435

CKETED

028723-016 U.of Calif RDH/DMM